

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET <i>6/9/06</i>							SERIAL NO. <i>10/603,501</i>	FILING DATE
							APPLICANT(S)	
CLAIMS								
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
NO	DEP	NO	DEP	NO	DEP		NO	DEP
1							51	2
2							52	2
3							53	2
4							54	2
5							55	2
6							56	2
7							57	2
8							58	
9							59	
10							60	
11							61	
12							62	
13							63	
14							64	
15							65	
16							66	
17							67	
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30							80	
31							81	
32							82	
33							83	
34							84	
35							85	
36							86	
37							87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND. <i>15</i>						TOTAL IND. <i>1</i>		
TOTAL DEP. <i>43</i>						TOTAL DEP. <i>35</i>		
TOTAL CLAIMS <i>57</i>						TOTAL CLAIMS <i>36</i>		